

YOUR EPA I.D. NUMBER
IAD051001337

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SECTION E - REPORTING INSTRUCTIONS

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CATEGORY 1 Complete an Individual Section F for each facility to which you shipped waste during this report period, reproducing this page as necessary, and Section G on the first page only.

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CATEGORY 3 Complete at least 2 reports, prepared as instructed for Categories 1 and 2.

CATEGORY 4 Complete Section F for each generator from which you received waste during the period of this report, reproducing this page as necessary, and complete Section G on the original page only.

SECTION F - HAZARDOUS WASTE MANAGEMENT

Items 1, 2 & 3: List the EPA I.D. number, name & address of the company to which you moved or from which you received hazardous waste.

1. EPA I.D. NUMBER IAD051001337	2. NAME Eagle Signal Div. Gulf + Western	3. MAILING ADDRESS 736 Federal Street Davenport, Iowa 52803
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4. TRANSPORTATION SERVICES USED - IDENTIFY BY NAME AND EPA I.D. NUMBER

5. WASTE IDENTIFICATION
(see attached instructions)

LINE NO.	DESCRIPTION OF WASTE	HAZARDOUS WASTE CODES	HANDLING CODE	AMOUNT OF WASTE (kilograms)
1	Chromic Acid	F1 01 01 6	[S1011]	544 1040
2	Cool-Phos	F1 01 01 3	[S1011]	218 416
3	Paint Sludge	D1 01 01 1	[S1011]	109 208
4	Isoprep # 188	F1 01 01 6	[S1011]	109 208
5	Derust	F1 01 01 6	[S1011]	218 416
6	Flux	D1 01 01 1	[S1011]	762 1456
7	Sanisol (Stod Sol)	D1 01 01 1	[S1011]	1306 2496
8	Cutting Oil	D1 01 01 8	[S1011]	435 832
9	Acid Etching	D1 01 01 2 D1 01 01 7	[S1011]	6 20 gal carbonyls 237 454
10	Unknown 10 (Flux)	D1 01 01 1	[S1011]	109 208
11	Unknown 11 (Flux)	D1 01 01 1	[S1011]	109 208
12	Unknown 12 (Isoprep #188)	F1 01 01 6	[S1011]	109 208
13	Unknown L3 ()	D1 01 01 2 D1 01 01 7	[S1011]	109 208

SECTION G - CERTIFICATION
(to be completed by all categories)

I certify under penalty of law that I have personally examined and am familiar with the information and documents submitted by me or on my behalf in this and any attached documents, and that based on my inquiry of those persons who furnished the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, which may result in the suspension or revocation of permits, and may result in criminal sanctions and imprisonment.



R00307803
RCRA RECORDS CENTER

NAME OF AUTHORIZED REPRESENTATIVE (print or type)

TITLE (vice-president or higher authority)

James R. Lindsay

Operations Manager

SIGNATURE

James R. Lindsay

DATE

February 27, 1984

SECTION E - REPORTING INSTRUCTIONS

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4. TRANSPORTATION SERVICES USED - IDENTIFY BY NAME AND EPA I.D. NUMBER

5. WASTE IDENTIFICATION
(see attached instructions)

LINE NO.	DESCRIPTION OF WASTE	HAZARDOUS WASTE CODES	HANDLING CODE	AMOUNT OF WASTE (kilograms)
1	Unknown 14 (Isoprep #188)	F101016 D101012	S1011	109 208
2	Unknown 15 ()	D101012 	S1011	109 208
3	Unknown 16 (Cutting Oil)	D101018 	S1011	109 208
4				
5				
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12				
13				

NOTE:
Changes made
by Steve Horn
after discussing
with Bob Tanghe. Error
explained in report.
New form to be submitted
so they can be resubmitted
S.H. 3/14/84

SECTION G - CERTIFICATION
(to be completed by all categories)

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NAME OF AUTHORIZED REPRESENTATIVE (print or type)

James R. Lindsay

TITLE (vice-president or higher authority)

Operations Manager

SIGNATURE

DATE

February 27, 1984

BIENNIAL HAZARDOUS WASTE REPORT

FOR CALENDAR YEAR 1983

HAZARDOUS WASTE
PROGRAM

SECTION A - HAZARDOUS WASTE OPERATION CATEGORY

(select the category which describes your operation)

CATEGORY

- 1 A hazardous waste generator that ships waste off-site within 90 days of generation, and does not treat, store or dispose of waste on-site.
- 2 A hazardous waste generator that also treats, stores 1000 kg. or more for more than 90 days, or disposes of all of generated waste on-site.
- 3 A hazardous waste generator that ships some generated waste off-site within 90 days of generation, and also treats, stores 1000 kg. or more for more than 90 days, or disposes of some generated waste on-site.
- 4 A facility that does not generate hazardous waste, but treats, stores or disposes of hazardous waste on-site.

ENTER CATEGORY HERE =>

2

SECTION B - TO BE COMPLETED BY CATEGORIES 1, 2 AND 3

1. You are not required to report as a hazardous waste generator under any of the following conditions. Check the block that meets the definition of your operation, if appropriate.

- ☐ NON-HANDLER Did not handle hazardous waste in any quantity during the calendar year 1983.
- ☐ SMALL-QUANTITY GENERATOR Did not generate more than 1000 kg. of hazardous waste (or more than 1 kg. of acutely hazardous waste) in any single month, or accumulate more than 1000 kg. of hazardous waste (or more than 1 kg. of acutely hazardous waste) on-site at any time during calendar year 1983.
- ☐ EXEMPT All wastes were generated in farming operations (40 CFR §262.51) or exempt pursuant to 40 CFR §261.4.
- ☐ BENEFICIAL USE All hazardous waste generated was beneficially used, reused, or recycled on-site prior to transportation or storage of more than 90 days, in accordance with 40 CFR §261.2 and §261.6(a).
- ☐ CLOSED Installation was closed prior to the beginning of calendar year 1983.
The status of this closed installation is ☐ TEMPORARY/ ☐ PERMANENT

2. ☐ This installation does not qualify for an exemption under 1, above.
(You are required to report as instructed in Section E on the reverse)

SECTION C - TO BE COMPLETED BY CATEGORIES 2, 3 AND 4

- | | |
|--|--|
| 1. COST ESTIMATE FOR FACILITY CLOSURE
\$ 3,460.00 | 2. COST ESTIMATE FOR POST-CLOSURE MONITORING & MAINTENANCE
(where applicable)
\$ N/A |
|--|--|

3. Check here ☐ If your facility did not treat, store or dispose of regulated quantities of hazardous waste during calendar year 1983. Refer to definitions in Section B, above - This exemption was maintained because the facility qualified as:

- NON-HANDLER ☐ (Check here ☐ if you wish to formally withdraw your Part A permit application and have not previously done so.)
- CLOSED ☐

4. ☒ This facility does not qualify for an exemption under 3., above.
(You are required to report as instructed in Section E on the reverse.)

SECTION D - TO BE COMPLETED BY ALL CATEGORIES

CHIEF EXECUTIVE OFFICER
EAGLE SIGNAL-DIV OF GULF & WESTERN
736 FEDERAL ST
DAVENPORT

IA 52803

IAD051001337

2. LOCATION OF OPERATION (if different from mailing address)

3. EPA I.D. NUMBER

IAD051001337

4. NAME OF CONTACT PERSON

Arlee Tripaldi - Supervisor

5. AREA CODE/TELEPHONE NUMBER
(319) 326-8281

CONTINUED ON REVERSE

IOWA DEPARTMENT OF WATER, AIR AND WASTE MANAGEMENT
BIENNIAL HAZARDOUS WASTE REPORT
FOR CALENDAR YEAR 1983

HAZARDOUS WASTE
PROGRAM

2-27-84

SECTION A - HAZARDOUS WASTE OPERATION CATEGORY

CATEGORY

(select the category which describes your operation)

- 1 A hazardous waste generator that ships waste off-site within 90 days of generation, and does not treat, store or dispose of waste on-site.
- 2 A hazardous waste generator that also treats, stores 1000 kg. or more for more than 90 days, or disposes of all of generated waste on-site.
- 3 A hazardous waste generator that ships some generated waste off-site within 90 days of generation, and also treats, stores 1000 kg. or more for more than 90 days, or disposes of some generated waste on-site.
- 4 A facility that does not generate hazardous waste, but treats, stores or disposes of hazardous waste on-site.

ENTER CATEGORY HERE =>

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SECTION B - TO BE COMPLETED BY CATEGORIES 1, 2 AND 3

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- ☐ CLOSED Installation was closed prior to the beginning of calendar year 1983.
The status of this closed installation is ☐ TEMPORARY/ ☐ PERMANENT

2. ☐ This installation does not qualify for an exemption under 1, above.
[You are required to report as instructed in Section E on the reverse]

SECTION C - TO BE COMPLETED BY CATEGORIES 2, 3 AND 4

- | | |
|--|--|
| 1. COST ESTIMATE FOR FACILITY CLOSURE

\$ 3,460.00 | 2. COST ESTIMATE FOR POST-CLOSURE MONITORING & MAINTENANCE
(where applicable)

\$ N/A |
|--|--|
3. Check here ☐ If your facility did not treat, store or dispose of regulated quantities of hazardous waste during calendar year 1983. Refer to definitions in Section B, above - This exemption was maintained because the facility qualified as:
- NON-HANDLER ☐ (Check here ☐ if you wish to formally withdraw your Part A permit application and have not previously done so.)
- CLOSED ☐

4. ☒ This facility does not qualify for an exemption under 3., above.
[You are required to report as instructed in Section E on the reverse.]

SECTION D - TO BE COMPLETED BY ALL CATEGORIES

CHIEF EXECUTIVE OFFICER
EAGLE SIGNAL-DIV OF GULF & WESTERN
736 FEDERAL ST
DAVENPORT

IA 52803

IAD051001337

2. LOCATION OF OPERATION (if different from mailing address)

3. EPA I.D. NUMBER

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4. NAME OF CONTACT PERSON

Arlee Tripaldi - Supervisor

5. AREA CODE/TELEPHONE NUMBER
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1	Chromic Acid	F1 01 01 6 I I I I I I I I	LS1011	544
2	Cool-Phos	F1 01 01 3 I I I I I I I I	LS1011	218
3	Paint Sludge	D1 01 01 1 I I I I I I I I	LS1011	109
4	Isoprep # 188	F1 01 01 6 I I I I I I I I	LS1011	109
5	Derust	F1 01 01 6 I I I I I I I I	LS1011	218
6	Flux	D1 01 01 1 I I I I I I I I	LS1011	762
7	Sanisol (Stod Sol)	D1 01 01 1 I I I I I I I I	LS1011	1306
8	Cutting Oil	D1 01 01 8 I I I I I I I I	LS1011	435
9	Acid Etching	D1 01 01 2 D1 01 01 7 I I I I I I I I I I I I I I I I	LS1011	237
10	Unknown 10 (Flux)	D1 01 01 1 I I I I I I I I	LS1011	109
11	Unknown 11 (Flux)	D1 01 01 1 I I I I I I I I	LS1011	109
12	Unknown 12 (Isoprep #188)	F1 01 01 6 I I I I I I I I	LS1011	109
13	Unknown L3 ()	D1 01 01 2 D1 01 01 7 I I I I I I I I I I I I I I I I	LS1011	109

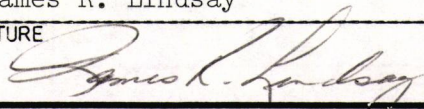
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TITLE (vice-president or higher authority)
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SIGNATURE



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Eagle Signal Div. Of
Gulf + Western

3. MAILING ADDRESS

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Davenport, Iowa 52803

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2	Unknown 15 ()	D101012	S1011	109
3	Unknown 16 (Cutting Oil)	D101018	S1011	109
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